

Pou tout paran ak founisè swen sante/doktè k ap bay swen sante:

Depatman Edikasyon Vil Nouyòk(NYC Department of Education, NYCDOE) ak OSH travay ansanm pou bay tout elèv ki gen bezwen espesyal sèvis. Sèvis sa yo pèmèt elèv yo patisipe totalman nan lekòl. Si pitit ou a bezwen sèvis sante ak akomodasyon dapre seksyon 504 lwa sou Reyabilitasyon, ranpli fòm ki nan pake sa a. Depatman Edikasyon Vil Nouyòk (NYC Department of Education, NYCDOE) egzijè yon nouvo **otorizasyon** pou sèvis chak ane lekòl

Gen twa tip fòm pou sèvis sante ak akomodasyon:

1. **Fòm pou bay medikaman(Medication Administration Forms, MAFs)** – Se doktè pitit ou a ki pou ranpli fòm sa a pou li ka resevwa medikaman ak tretman nan lekòl.
 - o Gen kat fòm MAF apa: opresyon; alèji; dyabèt ak lòt pwoblèm sante.
 - o Tanpri remèt fòm ou fin ranpli yo bay enfimyè lekòl la.
2. **Fòm pou bay tretman medikal yo preskri(Medically Prescribed Treatment)(ki pa medikaman)** – Se doktè pitit ou a ki pou ranpli fòm sa a pou mande pou pwosedi espesyal tankou bay manje nan tib, katetè, aspirasyon, etc. fèt nan lekòl la. Yo ka itilize fòm sa a pou tout tretman enfimyè ki konpetan bay.
 - o Tanpri remèt fòm ou fin ranpli yo bay enfimyè lekòl la.
3. **Demand pou akomodasyon dapre seksyon 504** – Ranpli sa a pou mande sèvis espesyal tankou bilding ki pa gen baryè, itilizasyon elevatè, modifikasyon nan egzamen, etc.
 - o **PA** itilize fòm pou sèvis ki mache ak andikap (related services) tankou terapi pou reprann aktivite, terapi fizik, terapi pou langaj ak diksyon, oryantasyon, etc. Yo ta dwe ofri Related services yo atravè yon Plan Edikasyon Endivisyèl(Individualized Education Program, IEP).
 - o Gen de fòm apa ou dwe ranpli: yonn pou paran ak yonn pou doktè pitit ou a
 - o Tanpri voye fòm ou fin ranpli yo ba kowòdonatè plan 504 lekòl ou a

Paran:

- Tanpri mennen pitit ou a kay doktè l chak ane pou li ranpli fòm sa yo.
- **Ou ta dwe bay enfimyè lekòl ou a fòm sa yo nan 31 me 2019 pou pi ta pou nouvo ane lekòl la. Fòm yo resevwa apre dat sa a ka gen reta pou yo apwouve yo.**
- Si enfimyè lekòl la pa disponib, yo ka avèti w pou w vin lekòl la pou bay pitit ou a medikaman.
- **Si ou chwazi pou itilize medikaman ki nan depo lekòl la, ou dwe voye pitit ou a avèk epinephrine, ponp opresyon ak lòt medikaman ki apwouve li gen pou pran poukont li nan pwomnad lekòl la** ak/oswa pwogram aprelekòl pou li ka genyen yo disponib. Medikaman ki nan depo yo se sèlman estaf OSH ki nan lekòl la ki pou itilize yo.
- **Tanpri asire w ou siyen do fòm lan pou pitit ou a ka resevwa sèvis sa yo nan lekòl**
- **Kole yon tifoto resan nan kwen goch anlè fòm medikaman an. Sa ap ede lekòl la idantifye pitit ou a pi byen.**

Tanpri kontakte enfimyè lekòl pitit ou a ak/oswa kowòdonatè 504 lekòl la si w gen nenpòt kesyon. Mèsi pou sipò ou.

Health Care Practitioners: please see back of page.



Health Care Practitioner Instructions for Completion of the Request for Accommodations Form

Please follow these guidelines when completing the forms:

- Your patient may be treated by several health care practitioners. The health care practitioner completing the form should be the one treating the condition for which services are requested.
- This form must be completed by the student's licensed medical provider (MD, DO, NP, PA) who has treated the student and can provide clinical information concerning the medical diagnoses outlined as the basis for this request. Forms cannot be completed by the parent/guardian. Forms cannot be completed by a resident.

All requests for accommodations are based on medical necessity. Please ensure that your answers are complete and accurate. **All requests for medical accommodations will be reviewed by the Office of School Health (OSH) clinical staff, who will contact you if additional clarification is needed.** There is a school nurse present in most schools.

Requests for 1:1 nursing will be reviewed on a case-by-case basis.

- Please clearly type or print all information on this form. **Illegible, incomplete, unsigned or undated forms cannot be processed and will be returned to the student's parent or guardian.**
- Provide the full name and current diagnoses of clinical relevance for the student.
- Describe the impact of the diagnoses/symptoms, medical issues, and/or behavioral issues that may affect the student during school hours or transport, including limitations and/or interventions required.
- Include any documentation and test results for any specialty services or referrals relevant to the accommodations requested.
- Only request services that are needed during school hours. Do not request medicine that can be given at home, before or after school hours.
- If a student requires medications or procedures to be performed, please complete and submit all relevant Medication Administration Forms (MAFs) and/or a Request for Medically Prescribed Treatment. The orders should be specific and clearly written. This allows the school nurse to carry it out in a clinically responsible way.
- Requests for alternative medicines will be reviewed on a case-by-case basis.
- Clearly print your name and include the valid New York State, New Jersey, or Connecticut license and NPI number.
- On the Medical Accommodations Request Form:
 - Please list the days and times that are best to contact you to provide further clarification of the request.
 - Please sign the attestation documenting that the information provided is accurate.
- Epinephrine may be stored in the classroom, in a common area, or transported with students as indicated in their Allergy Response Plan.

Student Skill Level: Students should be as self-sufficient as possible in school. Health Care Practitioners must determine whether the child is nurse-dependent, should be supervised, or is independent to take medicine or perform procedures

- **Nurse-Dependent Student:** nurse must administer. Medicine is typically stored in a locked cabinet in the medical room.
- **Supervised Student:** student self-administers, under adult supervision. The student should be able to identify their medicine, know the correct dose and when to take it, understand the purpose of their medicine, and be able to describe what will happen if it is not taken.
- **Independent Student:** student can self-carry/self-administer. For students who are independent, initial the section of the form that allows student to self-administer at school and during trips. **Students are never allowed to carry controlled substances.**
- ***If no skill level is selected, OSH clinical staff will designate the student as nurse-dependent by default, until further advised by the student's health care practitioner.***

Thank you for your cooperation.